

Related Change Request (CR) #: 4022

MLN Matters Number: MM4022

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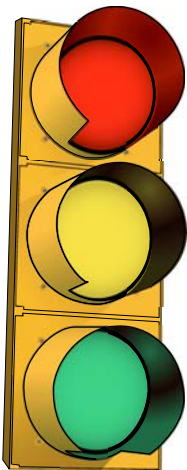
## *Medical Review Additional Documentation Requests (ADRs)*

**Note:** This article was revised to contain Web addresses that conform to the new CMS web site and to show they are now MLN Matters articles. All other information remains the same.

### Provider Types Affected

All Medicare providers and suppliers

### Provider Action Needed



#### **STOP – Impact to You**

Through the use of the Additional Documentation Request (ADR), your carrier, including Durable Medical Equipment Regional Carriers (DMERCs), or intermediary may ask you for additional documentation regarding a particular Medicare claim.

#### **CAUTION – What You Need to Know**

To get a more complete picture of a patient's clinical condition, CR4022 allows carriers, DMERCs, and intermediaries to request additional documentation about the patient's condition before and after a specific service to gain a more complete picture of the patient's clinical condition.

#### **GO – What You Need to Do**

Your staffs should be aware of ADRs and should be prepared to respond to them within 30 days.

### Background

When a carrier, DMERC, or intermediary (also referred to as Medicare contractor(s)), cannot make a coverage or coding determination from the information that has been provided on a claim and its attachments, they may ask for additional documentation by issuing an Additional Documentation Request (ADR). The Medicare contractor must request records related to the claim(s) being reviewed.

The Medicare contractor may collect documentation related to the patient's condition before and after a service in order to get a more complete picture of the patient's clinical condition. Your Medicare contractor

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will not deny other claims related to the documentation of the patient's condition before and after the claim in question unless they review and give appropriate consideration to the actual additional claims and associated documentation.

### Additional Information

For more information about ADRs during prepayment or postpayment medical review, go to <http://www.cms.hhs.gov/transmittals/downloads/R125PI.pdf> on the CMS web site.

Also useful is the *Medicare Program Integrity Manual*, Chapter 3 (Verifying Potential Errors and Taking Corrective Actions), Section 3.4.1.2 (Additional Documentation Requests (ADR) During Prepayment or Postpayment MR), which is an attachment to CR4022.

Finally, if you have any questions, please contact your carrier/DMERC/intermediary at their toll-free number, which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.pdf> on the CMS web site.

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